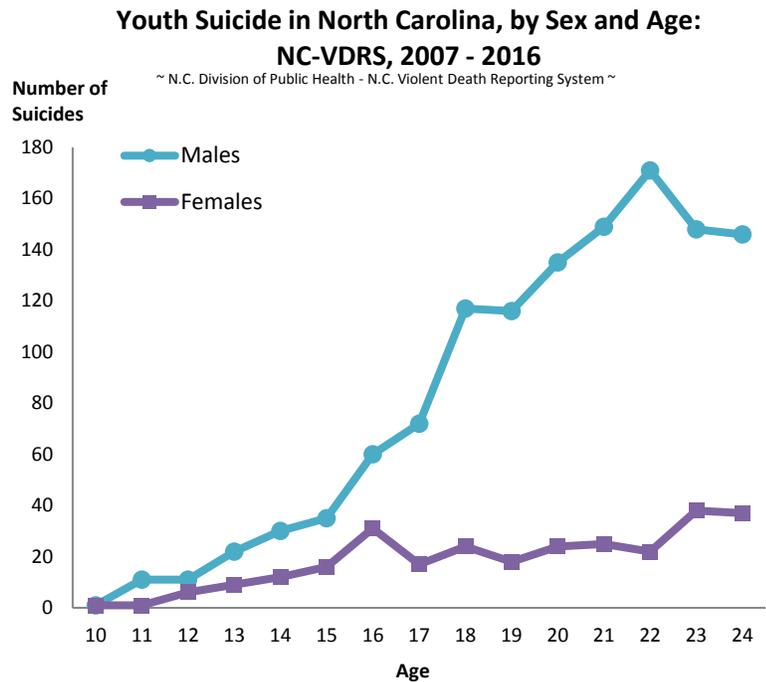


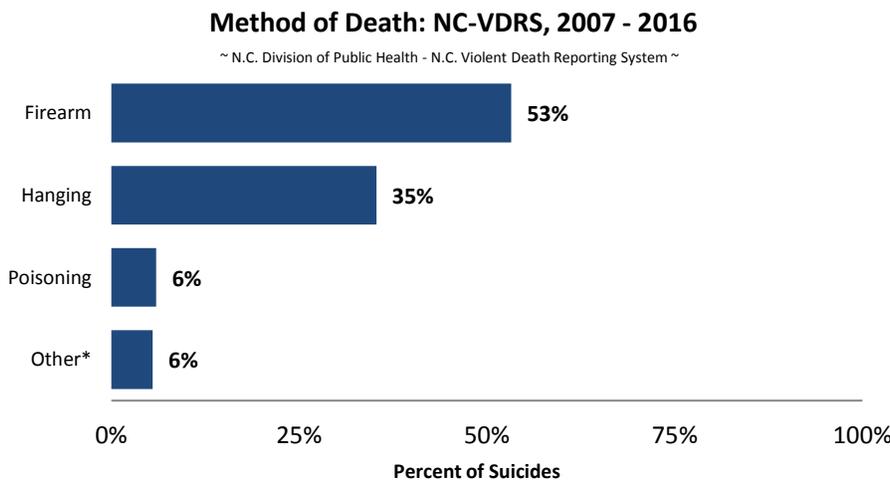
YOUTH SUICIDE IN NORTH CAROLINA, 2007 - 2016

The North Carolina Violent Death Reporting System (NC-VDRS) is a CDC-funded statewide surveillance system that collects detailed information on deaths that occur in North Carolina resulting from violence: homicide, suicide, unintentional firearm deaths, legal intervention and deaths for which intent could not be determined. NC-VDRS is a multi-source system that gathers information from death certificates, medical examiner reports and law enforcement reports. The goal of this system is to aid researchers, legislators, and community interest groups in the development of public health prevention strategies to reduce violent deaths. NC-VDRS began collecting data in January 2004. This document summarizes deaths among North Carolina residents ages 10-24 completing suicide for the years 2007 - 2016.



- From 2007 to 2016, 3,157 North Carolina residents ages 10 to 24 died as a result of violence. Of these violent deaths, 1,505 (47.7%) were suicide.
- Males consistently had a higher number of suicides than females, regardless of age.
- The number of suicides peaked for males at age 22 with 171 suicides and for females at age 23 with 38 suicides.

- 73 percent of all youth suicide victims were identified as non-Hispanic (NH) white, 16.3 percent as NH black, 6.2 percent as Hispanic, and 4.5 percent as belonging to another racial/ethnic group.

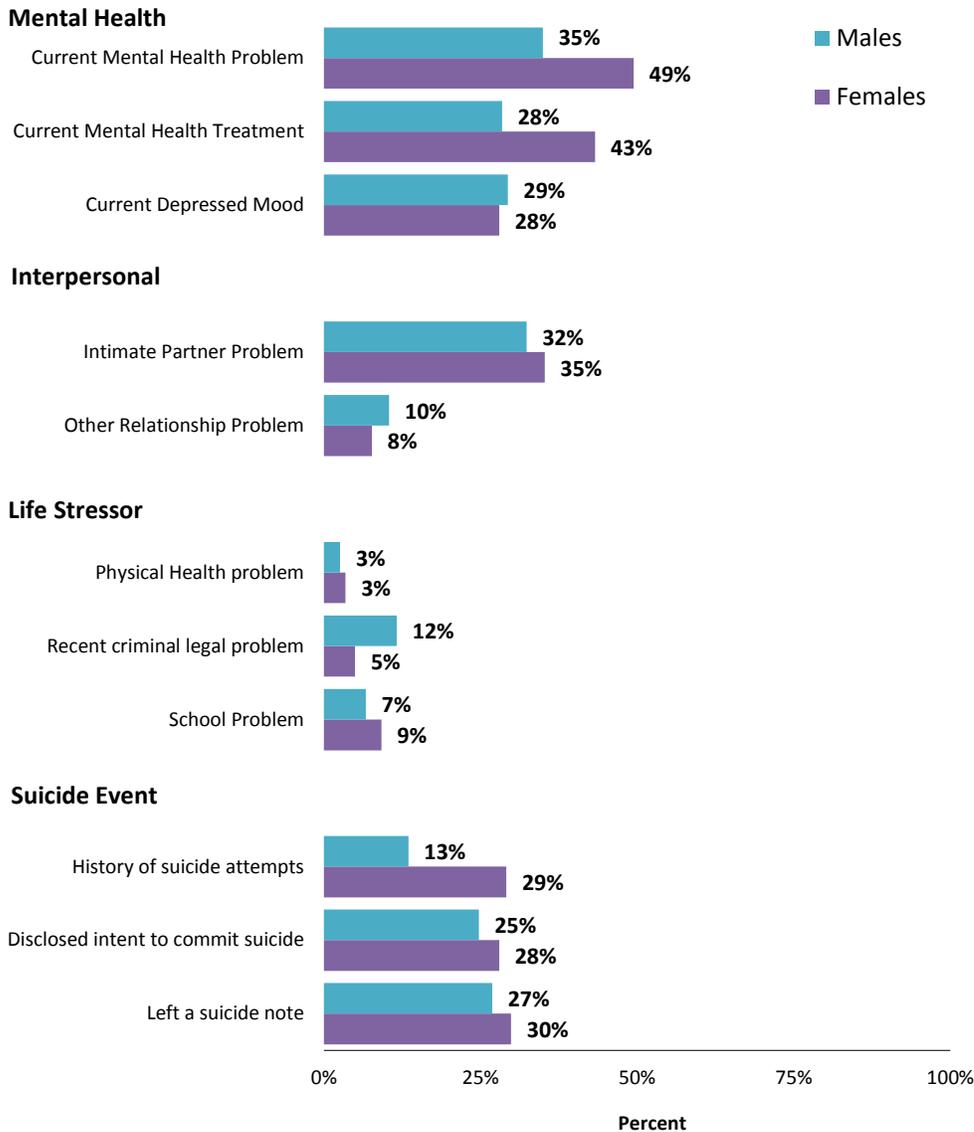


- Overall, the most common method of suicide among youth was firearms (53.2%), followed by hanging/strangulation/suffocation (35.3%) and poisoning (6.0%).
- Only 5.5 percent of suicides were completed using a method other than firearms, hanging or poisoning.

*Other includes falls, drowning, motor vehicle, fire/burns and other causes of suicide.

Precipitating Circumstances by Sex: NC-VDRS, 2007 - 2016

~ N.C. Division of Public Health - N.C. Violent Death Reporting System ~



- 49.4 percent of female and 34.9 percent of male suicide victims were characterized as having a current mental health problem when they completed suicide.

- A similar trend was seen for mental health treatment. Females (43.3%) were more likely than males (28.4%) to be receiving treated for a mental health problem at the time of suicide.

- 35.2 percent of female and 32.3 percent of male suicide victims had an intimate partner problem.

- 27.9 percent of female and 24.7 percent of male victims had disclosed their intent to commit suicide to someone else.

- Females (29.9%) were more likely to leave a suicide note than males (26.9%).

*Circumstances are known for 88% of males (n=1076) and 93% of females (n=261)

More information on suicide prevention efforts can be found at:

State Resource Partners

**N.C. Division of Mental Health,
Developmental Disabilities and Substance Abuse Services**

www.ncdhhs.gov/mhddsas

North Carolina Office of the Chief Medical Examiner

www.ocme.dhhs.nc.gov

The Triangle Consortium for Suicide Prevention

Contact: Phil Morse

www.trianglesuicideprevention.org

N.C. Injury and Violence Prevention's Youth Suicide Prevention Website

www.itsok2ask.com

National Resources

The Suicide Prevention Resource Center

www.sprc.org

The American Foundation for Suicide Prevention

www.afsp.org

The National Suicide Prevention Lifeline (for suicide crisis calls)

1-800-273-8255

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NC DEPARTMENT OF
HEALTH AND HUMAN SERVICES
Division of Public Health

North Carolina Violent Death
NC VDRS
Reporting System

N.C. Division of Public Health / www.publichealth.nc.gov / Injury Epidemiology & Surveillance Unit/ 919-707-5425

N.C. Violent Death Reporting System / 919-707-5432

State of North Carolina / Department of Health and Human Services / www.ncdhhs.gov

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Please see the NC-VDRS 2016 Annual Report for additional data and technical information.